

BEST AVAILABLE COPY

| MULTIPLE DEPENDENT CLAIM<br>FEE CALCULATION SHEET<br>(FOR USE WITH FORM PTO-875) |      |                        |      |                        |      |      | SERIAL NO.   |      | FILING DATE |      |      |      |
|--|------|------------------------|------|------------------------|------|------|--------------|------|-------------|------|------|------|
|  |      |                        |      |                        |      |      | APPLICANT(S) |      |             |      |      |      |
| CLAIMS   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| AS FILED   |      | AFTER<br>1st AMENDMENT |      | AFTER<br>2nd AMENDMENT |      | *    |              | *    |             | *    |      |      |
|  | IND. | DEP.                   | IND. | DEP.                   | IND. | DEP. | IND.         | DEP. | IND.        | DEP. | IND. | DEP. |
| 1  |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 2  |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 3  |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 4  |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 5  |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 6  |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 7  |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 8  |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 9  |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 10   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 11   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 12   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 13   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 14   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 15   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 16   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 17   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 18   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 19   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 20   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 21   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 22   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 23   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 24   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 25   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 26   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 27   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 28   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 29   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 30   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 31   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 32   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 33   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 34   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 35   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 36   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 37   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 38   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 39   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 40   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 41   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 42   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 43   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 44   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 45   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 46   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 47   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 48   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 49   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| 50   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| TOTAL IND.   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| TOTAL DEP.   |      |                        |      |                        |      |      |              |      |             |      |      |      |
| TOTAL CLAIMS   |      |                        |      |                        |      |      |              |      |             |      |      |      |